

Sexual Safety on Inpatient Wards

Key Points

1. All allegations of a sexual nature to be treated with sensitivity and with the knowledge that victims may well be distressed and in shock. All allegations to be taken seriously and victims concerns validated.
2. Not all sexual assaults can result in visible injury or physical harm, but sexual assault can cause severe emotional harm and distress to the individual.
3. The severity of allegations can range from rape and serious sexually assault to non-contact sexual assault, such as unwanted sexualised comments.
4. Any unwanted physical contact that could be experienced as sexual, is a sexual assault and should be considered as such.

For any incidents of a sexualised nature contact the NSFT Safeguarding Team



01603 421311



safeguarding@nsft.nhs.uk

If staff receive a disclosure of an allegation of a sexual nature the following actions must be followed:

Service user reports an allegation of penetrative assault, including digital, use of an object (Rape)

Supporting the Victim

Seek privacy for the victim and discuss with them who is the most appropriate staff member to provide emotional support. When discussing this with the patient, consider the gender of the member of staff and if a sexual safety champion is available.

Provide appropriate physical health care for any injuries.

Implement 1:1 observation and take physical observations. Ensure at least one member of staff is the same sex as the victim.

Provide emotional support and practical guidance, which includes explaining the need to preserve evidence

Attempt to preserve evidence to include victim's clothes, any incontinence aids (these need to remain on the victim) and request that the patient does not wash away any potential evidence. Member of staff to use gloves to preserve evidence.

Do not investigate as this is the responsibility of the Police. This includes: Do not interview victim, alleged perpetrator or witnesses. Accurately record any information that is being disclosed – see the 'Recording Information' section on this page.

Offer a referral to a Sexual Assault Referral Centre (SARC) and a Sexual Health Clinic

Offer the patient information on other sexual assault support organisations. Details of these organisations are available on the intranet.

Communication

Inform NSFT Safeguarding Team

Contact the Police on 999

Inform the Modern Matron in the first instance (on call manager for out of hours) who will inform relevant parties to include the Security Management Specialist and the Patient Safety Manager

Next of kin:

If the patient is aged 18+ and/or has capacity then discuss if they would like their next of kin to be informed.

If the patient is under 18 and/or is not capacitous then the next of kin must be informed

Notify allocated Social Worker and/or the Care Co-ordinator where applicable

Complete a Local Authority Safeguarding referral with accompanied DATIX

Ensure that the incident and any updates are handed over thoroughly in the staff handover meeting

If new information is discovered or disclosed then all appropriate parties are to be informed

Managing the Ward

Seek to secure the immediate safety of the victim and others present on the ward in respect of the perpetrator

Cordon off the area of the alleged assault

Do not investigate as this is ultimately the responsibility of the Police. This includes: Do not interview victim, alleged perpetrator or witnesses. Accurately record any information that is being disclosed

Review if other patients present on the ward require additional support

Recording of Information

Capture all information that is available at that time, including the following:

Time and date, words of the victim, any visible injuries using a body map form, names of any other patients in the vicinity, the staff on duty and any potential witnesses

If new information is discovered or disclosed then this information is to be captured and recorded.

Update clinical records and risk assessments on Lorenzo

Preserve any CCTV available